

Fill in this information to identify the case:

Debtor name Acacia Operating Company, LLC

United States Bankruptcy Court for the: Western District of Texas (State)

Case number (if known): 24-70194

☐ Check if this is an amended filing

Official Form 206Sum**Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets**1. Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*\$ 0.00**1b. Total personal property:**Copy line 91A from *Schedule A/B*\$ 297,474.19**1c. Total of all property:**Copy line 92 from *Schedule A/B*\$ 297,474.19**Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*\$ 3,240,000.00**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 6a of *Schedule E/F*\$ 3,987,341.40**3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 6b of *Schedule E/F*+\$ 205,976.48

4. Total liabilities

Lines 2 + 3a + 3b

\$ 7,433,317.88

Fill in this information to identify the case:Debtor name Acacia Operating Company, LLCUnited States Bankruptcy Court for the: Western District of TexasCase number (if known): 24-70194☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets — Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
- ☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****2. Cash on hand**

\$ 0.00

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

| Name of institution (bank or brokerage firm) | Type of account | Last 4 digits of account number | |
|--|-----------------|---------------------------------|-------------|
| 3.1. Community National Bank | Checking | 1 3 4 2 | \$ 7,474.19 |
| 3.2. _____ | _____ | _____ | \$ _____ |

4. Other cash equivalents (Identify all)

| | |
|--|---------------|
| 4.1. Letter of Credit from Community National Bank to NM OCD | \$ 250,000.00 |
| 4.2. _____ | \$ _____ |

5. Total of Part 1

\$ 257,474.19

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Part 2: Deposits and prepayments**6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.
- ☐ Yes. Fill in the information below.

Current value of debtor's interest**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

| | |
|------------|----------|
| 7.1. _____ | \$ _____ |
| 7.2. _____ | \$ _____ |

Debtor Acacia Operating Company, LLC Case number (if known) 24-70194
 Name

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1. _____ \$ _____

8.2. _____ \$ _____

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$ _____

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**☐ No. Go to Part 4.☒ Yes. Fill in the information below.**Current value of debtor's interest****11. Accounts receivable**

| | | | | | | |
|---------------------------|------------------|---|------------------------------------|---|---------|---------------------|
| 11a. 90 days old or less: | <u>40,000.00</u> | - | <u>0.00</u> | = | → | \$ <u>40,000.00</u> |
| | face amount | | doubtful or uncollectible accounts | | | |

| | | | | | | |
|------------------------|-------------|---|------------------------------------|---|---------|----------------|
| 11b. Over 90 days old: | <u>0.00</u> | - | <u>0.00</u> | = | → | \$ <u>0.00</u> |
| | face amount | | doubtful or uncollectible accounts | | | |

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ 40,000.00**Part 4: Investments****13. Does the debtor own any investments?**☒ No. Go to Part 5.☐ Yes. Fill in the information below.**Valuation method used for current value****Current value of debtor's interest****14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1. _____ \$ _____

14.2. _____ \$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

15.1. _____ % _____ \$ _____

15.2. _____ % _____ \$ _____

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. _____ \$ _____

16.2. _____ \$ _____

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ _____

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
☐ Yes. Fill in the information below.

| General description | Date of the last physical inventory | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|---|-------------------------------------|---|---|------------------------------------|
| 19. Raw materials | _____ MM / DD / YYYY | \$ _____ | _____ | \$ _____ |
| 20. Work in progress | _____ MM / DD / YYYY | \$ _____ | _____ | \$ _____ |
| 21. Finished goods, including goods held for resale | _____ MM / DD / YYYY | \$ _____ | _____ | \$ _____ |
| 22. Other inventory or supplies | _____ MM / DD / YYYY | \$ _____ | _____ | \$ _____ |
| 23. Total of Part 5 | | | | \$ _____ |

Add lines 19 through 22. Copy the total to line 84.

24. Is any of the property listed in Part 5 perishable?

- ☐ No
☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☐ No
☐ Yes. Book value _____ Valuation method _____ Current value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
☐ Yes. Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|---|---|---|------------------------------------|
| 28. Crops—either planted or harvested | \$ _____ | _____ | \$ _____ |
| 29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish | \$ _____ | _____ | \$ _____ |
| 30. Farm machinery and equipment (Other than titled motor vehicles) | \$ _____ | _____ | \$ _____ |
| 31. Farm and fishing supplies, chemicals, and feed | \$ _____ | _____ | \$ _____ |
| 32. Other farming and fishing-related property not already listed in Part 6 | \$ _____ | _____ | \$ _____ |

Debtor

Acacia Operating Company, LLC

Name

Case number (if known) 24-70194

33. **Total of Part 6.**

Add lines 28 through 32. Copy the total to line 85.

\$ _____

34. **Is the debtor a member of an agricultural cooperative?**☐ No☐ Yes. Is any of the debtor's property stored at the cooperative?☐ No☐ Yes35. **Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?**☐ No☐ Yes. Book value \$ _____ Valuation method _____ Current value \$ _____36. **Is a depreciation schedule available for any of the property listed in Part 6?**☐ No☐ Yes37. **Has any of the property listed in Part 6 been appraised by a professional within the last year?**☐ No☐ Yes**Part 7: Office furniture, fixtures, and equipment; and collectibles**38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**☒ No. Go to Part 8.☐ Yes. Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|--|---|------------------------------------|
| 39. Office furniture | \$ _____ | _____ | \$ _____ |
| 40. Office fixtures | \$ _____ | _____ | \$ _____ |
| 41. Office equipment, including all computer equipment and communication systems equipment and software | \$ _____ | _____ | \$ _____ |
| 42. Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles | | | |
| 42.1 _____ | \$ _____ | _____ | \$ _____ |
| 42.2 _____ | \$ _____ | _____ | \$ _____ |
| 42.3 _____ | \$ _____ | _____ | \$ _____ |

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$ _____

44. **Is a depreciation schedule available for any of the property listed in Part 7?**☐ No☐ Yes45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**☐ No☐ Yes

Debtor

Acacia Operating Company, LLC

Case number (if known)

24-70194

Name

Part 8: Machinery, equipment, and vehicles**46. Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

| General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number) | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|--|---|------------------------------------|
| 47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles | | | |
| 47.1 _____ | \$ _____ | _____ | \$ _____ |
| 47.2 _____ | \$ _____ | _____ | \$ _____ |
| 47.3 _____ | \$ _____ | _____ | \$ _____ |
| 47.4 _____ | \$ _____ | _____ | \$ _____ |
| 48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels | | | |
| 48.1 _____ | \$ _____ | _____ | \$ _____ |
| 48.2 _____ | \$ _____ | _____ | \$ _____ |
| 49. Aircraft and accessories | | | |
| 49.1 _____ | \$ _____ | _____ | \$ _____ |
| 49.2 _____ | \$ _____ | _____ | \$ _____ |
| 50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment) | | | |
| | \$ _____ | _____ | \$ _____ |
| 51. Total of Part 8. Add lines 47 through 50. Copy the total to line 87. | | | \$ _____ |

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☐ No
- ☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☐ No
- ☐ Yes

Debtor Acacia Operating Company, LLC Case number (if known) 24-70194
 Name _____

Part 9: Real property**54. Does the debtor own or lease any real property?**

- ☒ No. Go to Part 10.
☐ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

| Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available. | Nature and extent of debtor's interest in property | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|--|--|---|------------------------------------|
| 55.1 | | \$ _____ | _____ | \$ _____ |
| 55.2 | | \$ _____ | _____ | \$ _____ |
| 55.3 | | \$ _____ | _____ | \$ _____ |

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ _____

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☐ No
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Part 10: Intangibles and intellectual property**59. Does the debtor have any interests in intangibles or intellectual property?**

- ☒ No. Go to Part 11.
☐ Yes. Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|--|---|------------------------------------|
| 60. Patents, copyrights, trademarks, and trade secrets | \$ _____ | _____ | \$ _____ |
| 61. Internet domain names and websites | \$ _____ | _____ | \$ _____ |
| 62. Licenses, franchises, and royalties | \$ _____ | _____ | \$ _____ |
| 63. Customer lists, mailing lists, or other compilations | \$ _____ | _____ | \$ _____ |
| 64. Other intangibles, or intellectual property | \$ _____ | _____ | \$ _____ |
| 65. Goodwill | \$ _____ | _____ | \$ _____ |

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$ _____

Debtor

Acacia Operating Company, LLC

Name

Case number (if known) 24-70194

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☐ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☐ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.
☐ Yes. Fill in the information below.

**Current value of
debtor's interest**

71. Notes receivable

Description (include name of obligor)

_____ — _____ = ➔ \$ _____
 Total face amount doubtful or uncollectible amount

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

| | | |
|-------|----------------|----------|
| _____ | Tax year _____ | \$ _____ |
| _____ | Tax year _____ | \$ _____ |
| _____ | Tax year _____ | \$ _____ |

73. Interests in insurance policies or annuities

_____ \$ _____

74. Causes of action against third parties (whether or not a lawsuit has been filed)

_____ \$ _____

Nature of claim _____

Amount requested \$ _____

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

_____ \$ _____

Nature of claim _____

Amount requested \$ _____

76. Trusts, equitable or future interests in property

_____ \$ _____

77. Other property of any kind not already listed *Examples: Season tickets, country club membership*

_____ \$ _____

_____ \$ _____

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$ _____

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Debtor

Acacia Operating Company, LLC

Case number (if known)

24-70194

Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

| Type of property | Current value of personal property | Current value of real property |
|---|------------------------------------|--------------------------------|
| 80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i> | \$ 257,474.19 | |
| 81. Deposits and prepayments. <i>Copy line 9, Part 2.</i> | \$ 0.00 | |
| 82. Accounts receivable. <i>Copy line 12, Part 3.</i> | \$ 40,000.00 | |
| 83. Investments. <i>Copy line 17, Part 4.</i> | \$ 0.00 | |
| 84. Inventory. <i>Copy line 23, Part 5.</i> | \$ 0.00 | |
| 85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i> | \$ 0.00 | |
| 86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i> | \$ 0.00 | |
| 87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i> | \$ 0.00 | |
| 88. Real property. <i>Copy line 56, Part 9.</i> | → | \$ 0.00 |
| 89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i> | \$ 0.00 | |
| 90. All other assets. <i>Copy line 78, Part 11.</i> | + \$ 0.00 | |
| 91. Total. Add lines 80 through 90 for each column. 91a. | \$ 297,474.19 | + 91b. \$ 0.00 |
| 92. Total of all property on Schedule A/B. Lines 91a + 91b = 92. 297,474.19 | | \$ 297,474.19 |

Fill in this information to identify the case:

Debtor name Acacia Operating Company, LLC
 United States Bankruptcy Court for the: Western District of Texas
 Case number (if known): 24-70194

☐ Check if this is an amended filing

Official Form 206D**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims**2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.

| | | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | |
|--|---|---|--|---------------|
| 2.1 | Creditor's name Cibolo Energy Resources Creditor's mailing address P.O. Box 1110 Boerne, TX 78006 Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor, <div style="border: 1px solid black; height: 30px; width: 250px; margin-top: 5px;"></div> | Describe debtor's property that is subject to a lien Letter of Credit from Community National Bank to NM OCD Describe the lien Agreement you made Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$ 3,240,000.00 | \$ 257,474.19 |
| 2.2 | Creditor's name Creditor's mailing address Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <div style="border: 1px solid black; height: 30px; width: 250px; margin-top: 5px;"></div> <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ | Describe debtor's property that is subject to a lien <div style="border: 1px solid black; height: 100px; width: 300px; margin-top: 5px;"></div> Describe the lien Is the creditor an insider or related party? <input type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$ _____ | \$ _____ |
| 3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. | | \$ 3,240,000.00 | | |

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

[illegible]

Fill in this information to identify the case:

Debtor Acacia Operating Company, LLC

United States Bankruptcy Court for the: Western District of Texas

Case number 24-70194
(If known)

☐ Check if this is an amended filing

Official Form 206E/F**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
- ☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.**2.1 Priority creditor's name and mailing address**

Bureau of Land Management
Denver Federal Center Bldg. 85
P.O. Box 25047
Denver, CO 80225

As of the petition filing date, the claim is: \$3,987,341.40

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Total claim

Priority amount

\$

Date or dates debt was incurred

Basis for the claim:

Taxes & Other Government Units

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

2.2 Priority creditor's name and mailing address

Internal Revenue Service
Centralized Insolvency Operation
P.O. Box 7317
Philadelphia, PA 19101

As of the petition filing date, the claim is: \$ Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$

Date or dates debt was incurred

Basis for the claim:

Taxes & Other Government Units

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

2.3 Priority creditor's name and mailing address

New Mexico Land Office
P.O. Box 1148
Santa Fe, NM 87504

As of the petition filing date, the claim is: \$ Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$

Date or dates debt was incurred

Basis for the claim:

Taxes & Other Government Units

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2.4 Priority creditor's name and mailing address

\$ Unknown

\$

New Mexico Oil Conservation Division
1220 S. St. Francis Drive
Santa Fe, NM 87505

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number

Taxes & Other Government Units

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2. Priority creditor's name and mailing address

\$ \$

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) ()

2. Priority creditor's name and mailing address

\$ \$

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) ()

2. Priority creditor's name and mailing address

\$ \$

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) ()

Debtor

Acacia Operating Company, LLC
Name

Case number (if known)

24-70194

21

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

| | | Amount of claim |
|------------|---|---|
| 3.1 | Nonpriority creditor's name and mailing address Blue Cross Blue Shield of Texas P.O. Box 650615 Dallas, TX 75265 Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ Unknown |
| 3.2 | Nonpriority creditor's name and mailing address Chisos, Ltd. c/o Holland & Hart LLP 110 N. Guadalupe Street, Ste. 1 Santa Fe, NM 87501 Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Lawsuit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ Unknown |
| 3.3 | Nonpriority creditor's name and mailing address COG Operating LLC c/o Holland & Hart LLP 110 N. Guadalupe Street, Ste. 1 Santa Fe, NM 87501 Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Lawsuit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ Unknown |
| 3.4 | Nonpriority creditor's name and mailing address Concho Oil & Gas LLC c/o Holland & Hart LLP 110 N. Guadalupe Street, Ste. 1 Santa Fe, NM 87501 Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Lawsuit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ Unknown |
| 3.5 | Nonpriority creditor's name and mailing address ConocoPhillips Company c/o Holland & Hart LLP 110 N. Guadalupe Street, Ste. 1 Santa Fe, NM 87501 Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Lawsuit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ Unknown |
| 3.6 | Nonpriority creditor's name and mailing address EP&S, LLC P.O. Box 1468 Eunice, NM 88231 Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 1,476.88 |

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | | | |
|------------------|--|---|--------------|
| 3. ⁷ | Nonpriority creditor's name and mailing address Frontier Field Services LLC 10077 Grogan's Mill Rd., Ste. 300 Spring, TX 77380 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$ 1,345.57 |
| | Date or dates debt was incurred _____ Last 4 digits of account number _____ | Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| 3. ⁸ | Nonpriority creditor's name and mailing address GSM Oilfield Services, Inc. P.O. Box 50790 Amarillo, TX 79159 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$ 4,320.41 |
| | Date or dates debt was incurred _____ Last 4 digits of account number _____ | Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| 3. ⁹ | Nonpriority creditor's name and mailing address Guardian P.O. Box 981590 El Paso, TX 79998 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$ Unknown |
| | Date or dates debt was incurred _____ Last 4 digits of account number _____ | Basis for the claim: Insurance Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| 3. ¹⁰ | Nonpriority creditor's name and mailing address Independent Field Services LLC P.O Box 557 Artesia, NM 88211 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$ 55,045.86 |
| | Date or dates debt was incurred _____ Last 4 digits of account number _____ | Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| 3. ¹¹ | Nonpriority creditor's name and mailing address InSource Insurance Group, LLC 901 W. Wall Street, Ste. 200 Midland, TX 79701 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$ Unknown |
| | Date or dates debt was incurred _____ Last 4 digits of account number _____ | Basis for the claim: Insurance Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | | | |
|------------------|---|---|--------------|
| 3. ¹² | Nonpriority creditor's name and mailing address L & F Oilfield Services, LLC 49 Falcon Rd. Lovington, NM 88260 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$ 45,681.53 |
| | Date or dates debt was incurred _____ Last 4 digits of account number _____ | Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| 3. ¹³ | Nonpriority creditor's name and mailing address Martindale Consulting 4100 Perimeter Center Dr., Ste. 300 Oklahoma City, OK 73112 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$ 5,771.25 |
| | Date or dates debt was incurred _____ Last 4 digits of account number _____ | Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| 3. ¹⁴ | Nonpriority creditor's name and mailing address Omega Automation, LLC P.O. Box 769 Hobbs, NM 88241 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$ 2,577.75 |
| | Date or dates debt was incurred _____ Last 4 digits of account number _____ | Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| 3. ¹⁵ | Nonpriority creditor's name and mailing address Precision Pump & Supply P.O. Box 115 Loco Hills, NM 88255 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$ 81,915.80 |
| | Date or dates debt was incurred _____ Last 4 digits of account number _____ | Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| 3. ¹⁶ | Nonpriority creditor's name and mailing address Q2 Artificial Lift Services, Inc. P.O. Box 206860 Dallas, TX 75320 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$ 1,806.82 |
| | Date or dates debt was incurred _____ Last 4 digits of account number _____ | Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | | | |
|------------------|---|---|-------------|
| 3. ¹⁷ | Nonpriority creditor's name and mailing address Red Bird LP Gas Co., Inc. P.O. Box 1291 Eunice, NM 88231 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$ 642.38 |
| | Date or dates debt was incurred _____ Last 4 digits of account number _____ | Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| 3. ¹⁸ | Nonpriority creditor's name and mailing address Smith Welding 005 E. 17th St. Roswell, NM 88201 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$ 1,540.80 |
| | Date or dates debt was incurred _____ Last 4 digits of account number _____ | Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| 3. ¹⁹ | Nonpriority creditor's name and mailing address The Supply Store Inc. 132445 Lovington Highway Loco Hills, NM 88255 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$ 3,851.43 |
| | Date or dates debt was incurred _____ Last 4 digits of account number _____ | Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| 3. _____ | Nonpriority creditor's name and mailing address | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$ _____ |
| | Date or dates debt was incurred _____ Last 4 digits of account number _____ | Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | |
| 3. _____ | Nonpriority creditor's name and mailing address | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$ _____ |
| | Date or dates debt was incurred _____ Last 4 digits of account number _____ | Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | |

Debtor

Adcoia Operating Company, LLC

Name

21

Case number (if known)

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. **Total claims from Part 1**

5a.

\$ 3,987,341.40

5b. **Total claims from Part 2**

5b.

+ \$ 205,976.48

5c. **Total of Parts 1 and 2**

5c.

\$ 4,193,317.88

Lines 5a + 5b = 5c.

Fill in this information to identify the case:

Debtor name Acacia Operating Company, LLC

United States Bankruptcy Court for the: Western District of Texas

Case number (if known): 24-70194 Chapter 7

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- ☒ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1

State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.2

State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.3

State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.4

State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.5

State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

Fill in this information to identify the case:Debtor name Acacia Operating Company, LLCUnited States Bankruptcy Court for the: Western District of TexasCase number (If known): 24-70194☐ Check if this is an amended filing**Official Form 206H****Schedule H: Codebtors****12/15****Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.****1. Does the debtor have any codebtors?**☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☐ Yes**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.****Column 1: Codebtor****Column 2: Creditor****Name****Mailing address****Name***Check all schedules that apply:*

2.1

☐ D
☐ E/F
☐ G

2.2

☐ D
☐ E/F
☐ G

2.3

☐ D
☐ E/F
☐ G

2.4

☐ D
☐ E/F
☐ G

2.5

☐ D
☐ E/F
☐ G

2.6

☐ D
☐ E/F
☐ G

Fill in this information to identify the case and this filing:

Debtor Name Acacia Operating Company, LLC

United States Bankruptcy Court for the: Western District of Texas

Case number (if known): 24-70194

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 01/08/2025
MM / DD / YYYY

x R. K. Stitzel

Signature of individual signing on behalf of debtor

Robert Stitzel

Printed name

Managing Member of Acacia Resources, LLC

Position or relationship to debtor